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TITLE: Antiretroviral Medication Adherence Among the REACH HIV-Infected Adolescent Cohort.

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BACKGROUND/OBJECTIVES: HIV-infected adolescents from 16 locations in 13 U.S. cities were recruited into the REACH (Reaching for Excellence in Adolescent Care and Health) project, the first large-scale disease progression study of HIV-positive adolescents infected through sexual behavior or injection drug use. Adherence to highly active antiretroviral therapy (HAART) was investigated.

METHODS: Only REACH participants prescribed triple drug therapy (three separate drugs or Combivir plus another antiretroviral) are included in this analysis. Medical chart abstraction of current HAART prescriptions were obtained, and three self-report measures of medication adherence were utilized: (1) whether the subject could identify all their prescribed medications; (2) a Likert scale rating of how often they took the medications as prescribed; and (3) a comparison of subject report of dosage and of schedule to the medical chart abstraction.

RESULTS: Of a total of 257 participants, 112 (72% female) were eligible for this analysis. A small percentage of participants (8%) did not correctly identify all their prescribed medications, and 12% reported never taking at least one of their medications. Therefore, the majority (80%) said they were taking all of their medications at least some of the time. Of those subjects, 76% reported taking the correct dosage. In summary, only 30% of this entire sample (N = 112) appeared to be fully compliant. There was a strong association between subject ratings of adherence and reduced viral load. Gender, race/ethnicity, age, number of medications, number of times prescribed per day, substance use, and depression were examined as possible covariates of compliance. Number of medications and depression were significantly associated with decreased adherence.

CONCLUSIONS: Strict adherence to HAART is very important to prevent the development of resistant strains of HIV. Our data indicate that compliance may be a serious problem among HIV+ adolescents. Better education, intervention, and efforts to improve the ease of medication use are essential. The REACH network has recently issued a publication on medication adherence, and has developed a medication adherence program for HIV+ adolescents. Future studies from the REACH cohort will further explore reported adherence with antiretroviral activity.

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